



County of San Bernardino

F A S

CONTRACT TRANSMITTAL

FOR COUNTY USE ONLY

<input checked="" type="checkbox"/> New <input type="checkbox"/> Change <input type="checkbox"/> Cancel	Vendor Code	SC	Dent.	A	Contract Number			
County Department Agriculture/Weights & Measures			Dept. AWM	Orgn. AWM	Contractor's License No.			
County Department Contract Representative Bobbie Willhite			Telephone 909.386.8336		Total Contract Amount \$800.00			
Contract Type <input checked="" type="checkbox"/> Revenue <input type="checkbox"/> Encumbered <input type="checkbox"/> Unencumbered <input type="checkbox"/> Other:								
If not encumbered or revenue contract type, provide reason:								
Commodity Code		Contract Start Date 7/1/03	Contract End Date 6/30/04	Original Amount \$800.00	Amendment Amount			
Fund AAA	Dept. AWM	Organization AWM	Appr. 200	Obi/Rev Source 8735	GRC/PROJ/JOB No. 20001210	Amount \$800.00		
Fund	Dept.	Organization	Appr.	Obi/Rev Source	GRC/PROJ/JOB No.	Amount		
Fund	Dept.	Organization	Appr.	Obi/Rev Source	GRC/PROJ/JOB No.	Amount		
Project Name <u>Organic Food Inspection</u>			Estimated Payment Total by Fiscal Year					
			FY	Amount	I/D	FY	Amount	I/D

CONTRACTOR California Department of Food and Agriculture

Federal ID No. or Social Security No. _____

Contractor's Representative Sandi Conry, Acquisitions Manager

Address 1220 N Street, Room 100, Sacramento, CA 95814

Phone (916) 651-6371

Nature of Contract: *(Briefly describe the general terms of the contract)*

This agreement from the California Department of Food and Agriculture provides \$800 and requires the County Department of Agriculture/Weights and Measures to register and inspect organic food producers and handlers and investigate organic food complaints from July 1, 2003, through June 30, 2004, on behalf of the State.

(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)

Approved as to Legal Form (sign in blue ink)

Reviewed as to Contract Compliance

Presented to BOS for Signature

County Counsel – Scott Runyan, Deputy

Department Head

Date _____

Date _____

Date _____

Auditor/Controller-Recorder Use Only

☐ Contract Database ☐ FAS

Input Date

Keyed By

THIS IS NOT A CONTRACT
THIS IS A COVER
TRANSMITTAL ONLY

(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)

Approved as to Legal Form (sign in blue ink)	Reviewed as to Contract Compliance	Presented to BOS for Signature
▶	▶	▶
County Counsel – Scott Runyan, Deputy		Department Head
Date	Date	Date

Auditor/Controller-Recorder Use Only	
<input type="checkbox"/> Contract Database	<input type="checkbox"/> FAS
Input Date	Keyed By